Fill in this information to identify	your case:					
Victoria Marcocelli						
Debtor 1 First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Eastern District of Pennsyl	vania				
Case number 21-11249 Check if this is:						
(If known)				nended filing		
				☐ A supp	plement showing postpetition chapter 13	
Official Form 106I					e as of the following date:	
				MM / D	DD / YYYY	
Schedule I: You	rincome				12/15	
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment						
Fill in your employment		Debtor 1			Debtor 2 or non-filing spouse	
information. If you have more than one job,		Deptor 1			Debitor 2 or Hori-Hilling spouse	
attach a separate page with information about additional employers.	Employment status	Employed	Employed		Employed	
		☐ Not employed			☐ Not employed	
Include part-time, seasonal, or self-employed work.		Marketing			Messenger	
Occupation may include student	Occupation					
or homemaker, if it applies.	Fundamenta mana	Trader Joe's Company			Bicycle Transit Systems Inc	
	Employer's name					
	Employer's address		800 S Shamrock Ave		1330 N. 5TH STREET	
	1				Number Street	
		Monrovia, CA 91016			Philadelphia, PA 19122	
		City	State ZIP Code		City State ZIP Code	
How long employed there? 1.5 Months						
Part 2: Give Details About Monthly Income						
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing						
spouse unless you are separated.						
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.						
	·		For	Debtor 1	For Debtor 2 or	
					non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly,		22	,552.00	\$4,000.00		
3. Estimate and list monthly over		3. +\$	0.00	+ \$0.00		
4. Calculate gross income. Add line 2 + line 3.			4. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2,552.00	\$4,000.00	

Entered 08/09/21 18;25 Filed 08/09/21 Doc 14 Document Page 2 of 2se number (if know Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse 4,000.00 2,552.00 Copy line 4 here 5. List all payroll deductions: 462.00 502.00 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 228.93 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 701.36 5e. Insurance 5e. 0.00 0.00 5f. Domestic support obligations 5f 0.00 0.00 5g. Union dues 5g. 0.00 0.00 5h. Other deductions. Specify: __ 5h. 462.00 1,432.29 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 2,090.00 2,567.71 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 0.00 monthly net income. 8a. 0.00 0.00 8b. Interest and dividends 8h 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive 0.00 0.00 Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 0.00 0.00 8d. Unemployment compensation 8d. 0.00 0.00 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 0.00 Specify: 0.00 0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: Overpayment of federal taxes 250.00 0.00 8h 250.00 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. Calculate monthly income. Add line 7 + line 9. 4,907.71 2,340.00 2,567.71 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. **+** Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 4,907.71 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

✓ No.

Official Form 106I